

Jennifer M. Granholm GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF CONSUMER & INDUSTRY SERVICES LANSING

David C. Hollister DIRECTOR

MEMORANDUM

DATE: February 24, 2003

TO: Long Term Care Facilities

FROM: MDCIS/Clinical Advisory Panel

Quality Improvement Nurse Consultants

RE: Process Guideline for the Prevention and Management of

Pressure Ulcers

Overview

Best clinical practice is only worthwhile to the extent that we use it to guide care for our residents.

Collaboratively, we are striving to improve prevention and management of pressure ulcers for nursing home residents in Michigan. The purpose of the Guide is to clarify how to apply the **Documentation Checklist: Process Guideline for the Prevention and Management of Pressure Ulcers**. Electronic copies are available for reprint at www.michigan.gov. Select State Websites, followed by Family, Health & Safety; under Featured Services, select Quality Improvement Nurse Consultants and in the far right margin click on Best Practices.

This optional "best practice" tool will be further explained to you at the Spring 2003 Joint Provider/Surveyor Training on March 11, 2003. Effective date for usage of the tool will be March 31, 2003. Both facilities and surveyors will have the opportunity to use the Documentation Checklist when resident pressure ulcers are of concern. Facilities will be accorded the opportunity to demonstrate that they have followed the steps in this guideline, as evidence to support an appropriate care process related to the prevention and management of pressure ulcers.

A workgroup including doctors, nurses and dieticians with experience in geriatrics and nursing home care discussed pressure ulcers in depth. They used generally accepted, current references about pressure ulcers to help them prepare the Process Guideline. The Documentation Checklist contains a series of steps related to preventing and managing pressure ulcers.

Best clinical practice information helps each facility provide the best possible care throughout the year. Along with information in the Federal OBRA regulations, our surveyors will use these Pressure Ulcer Prevention February 21, 2003 Page Two

Process Guidelines to review how your facility is managing pressure ulcers. We encourage you to examine your process to prevent and manage resident pressure ulcers and to consider the application of the following information.

The Basic Care Process

The management of all conditions and problems in a nursing home should follow these basic steps:

Assessment/recognition. The purpose of this step is to provide a rational basis for deciding whether there is a need, risk, or problem and what to do about it. The facility's staff and practitioners collect relevant information about the resident (history, signs and symptoms, known medical conditions, personal habits and patterns, etc.) and then a) evaluate and organize that information to identify whether the individual has a specific need, condition, or problem; and b) describe and define the nature (onset, duration, frequency, etc.) of the risk, condition, or problem.

<u>Diagnosis/cause identification</u>. The facility's staff and practitioners attempt to identify causes of a condition or problem, or explain why causes cannot or should not be identified.

<u>Treatment/management</u>. The facility's staff and practitioners use the above information to decide how to manage a resident's condition, symptom, or situation. Where causes may be identifiable and correctable, they seek and address them or explain why they could not or should not have done so.

<u>Monitoring</u>. The facility's staff and practitioners evaluate the individual's progress over time in relation to a risk, need, problem, condition, or symptom, consider the effectiveness of interventions, and make a systematic determination about what to do next.